

Rosedale Bible College
Liability waiver and medical information

Overnight guests under 18 must have a signed consent form/liability waiver from a parent/legal guardian prior to spending the night in the dorm. You can mail this form in (signed) or bring it with you when you come, **along with a copy of your insurance card.**

Name _____ Date of birth _____

Health Insurance Carrier _____

ID Number _____ Policy Number _____

Emergency contact #1 _____

Relationship to guest _____ Phone _____

Emergency contact #2 _____

Relationship to guest _____ Phone _____

Current Medications (include as needed): _____

Other medical conditions or allergies: _____

Section A: Emergency Medical Authorization

I affirm that the above-named person is my child and has my consent to spend the night in the RBC dormitory. If I can't be contacted, I authorize a representative of RBC to obtain needed medical care in the event of an emergency. I hereby give my consent for (1) administration of any treatment deemed necessary by a licensed physician or dentist; and (2) transfer to any hospital reasonably accessible. This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in necessity for such surgery, are obtained before surgery is performed.

Section B: Statement of Medical Liability Waiver

Rosedale Bible College is not liable for costs resulting from accidents, injury or illness during involvement in RBC programs or related activities. That exemption applies both to direct costs for persons without a medical health or accident coverage plan, and to costs not covered in an active health plan.

Parent/Guardian Signature _____ **Date** _____

